PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

FILING DATE

10/17/2005

10/04/2007

7590

WASHINGTON, DC 20001-5303

BROWDY AND NEIMARK, P.L.L.C. 624 NINTH STREET, NW SUITE 300

1444

APPLICATION NO.

10/553,319

P.O. Box 1450 Alexandria, Virginia 22313-1450

Certificate of Mailing or Transmission I hereby certify that this Fock) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (5/1) 273-2885, on the date indicated below.

ATTORNEY DOCKET NO.

PEER2A

(Signature) (Date)

CONFIRMATION NO.

1758

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

FIRST NAMED INVENTOR

Aui Poor

| 4a. 1 no tonowing ice(s) are submitted: | 40. Payment of rec(s): (Please first reapply any previously paid issue tee shown above) | | |
|--|--|--|--|
| M Isriic Fee | A check is enclosed. | | |
| Publication Fee (No small entity discount permitted) | Payment by credit card. Form PTO-2038 is attached: | | |
| Advance Order - # of Copies | The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Aecount Number 0 2-4035 (enclose an extra copy of this form). | | |
| 5. Change in Entity Status (from status indicated above) | | | |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. | b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). | | |
| NOTE: The Issue Fee and Publication Fee (if required) will not be accinterest as shown by the records of the United States Patent and Trader | cepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in mark Office. | | |
| Authorized Signature Atlent Kessner | Date January 3, 7008 | | |
| Typed or printed name Sheridan Ne | Date January 3, 2008 imark Registration No. 20, 520 | | |
| This collection of information is required by 37 CFR 1.311. The informal papillation. Confidentiality is governed by 35 U.S.C. 122 and 37 submitting the completed application form to the USPTO. Time will this form and/or suggestions for reducing this burden, should be sent Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES Alexandria, Virginia 22313-1450. | mastion is required to obtain or retain a benefit by the public which is to file (and by the USPTO opprocess). FORE 1.4.1 This collection is estimated to take 12 minutes to compoler, including galarting, repeating, and vary depending upon the individual case. Any comments on the amount of time, you could be to the Chief Information Officer U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. OR COMPLETED FORMS TO 'THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, | | |
| Under the Paperwork Reduction Act of 1995, no persons are required to | to respond to a collection of information unless it displays a valid OMB control number. | | |
| | | | |

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

TITLE OF INVENTION: METHOD AND SYSTEM FOR USE IN OPTICAL CODE DIVISION MULTIPLE ACCESS

| DEVELOPMENT COMPANY | LTD. | REHOVOT, | ISI |
|--|------|---------------------------|-----|
| Nicona barbaka anana da kanantana anana anana anana da | | Drenn | |

 \sqcup Individual \sqcup Corporation or other private group entity \square Government case check the appropriate assignce category or categories (will not be printed on the patent):

mile of the state of the state of the state of